

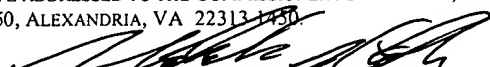


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Sean Walsh	Examiner:	Chiang, Jack
Serial No.:	09/866,806	Group Art Unit:	2642
Filed:	05/29/2001	Docket No.	WALS.02USC1
For:	Portable Telephone Mounting Base		(18459-003)

Mail Stop Amendment
Commissioner for Patents
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PROVISIONAL ELECTION WITH TRAVERSE
AND SUPPLEMENTAL AMENDMENT

Sir:

In response to the restriction requirement in the Office Action, Paper No. 7, dated June 16, 2004, the applicant hereby provisionally elects the Group I claims 1-5, 14, 16 with traverse. Also, please further amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Traverse/Arguments begin on page 5 of this paper.



2642 41

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/866,806	
	Filing Date	05/29/2001	
	First Named Inventor	Sean Walsh	
	Art Unit	2642	
	Examiner Name	Jack Chiang	
Total Number of Pages in This Submission	8	Attorney Docket Number	WALS.01USC1 (18459-003)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James R. Young, Reg. No. 27,847
Signature	
Date	July 16, 2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Natasha Galbreath
Signature	Date 7-16-04

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